



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT: LESTER J. VAN ESS - 2
SERIAL NO.: 10/723,162 GROUP: 3739
FILED: NOVEMBER 26, 2003
TITLE: LAPAROSCOPIC INSTRUMENT AND METHOD FOR ITS USE

SUBMISSION OF SUPPLEMENTAL DECLARATION

MAIL STOP NON-FEE AMENDMENT
Hon. Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Submitted herewith is a further executed DECLARATION which has been signed and dated by the inventor in the above-identified application. This Declaration is being submitted to replace the original Declaration, which Declaration had a typographical error in the Post Office Address. It is requested that this Declaration be substituted for the Declaration presently on file in this application.

Respectfully submitted,
LESTER J. VAN ESS - 2

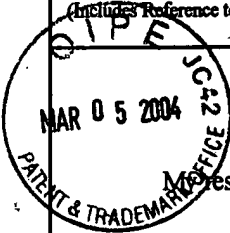
COLLARD & ROE, P.C.
1077 Northern Boulevard
Roslyn, New York 11576
(516) 365-9802
FJD:jc

Allison C. Collard, Reg.No.22,532
Edward R. Freedman, Reg.No.26,048
Frederick J. Dorchak, Reg.No.29,298
Attorney for Applicants

Enclosure: Executed Substitute Declaration

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on March 3, 2004.

Ingrid Mittendorf



As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

LAPAROSCOPIC INSTRUMENT AND METHOD FOR ITS USE

the specification of which (check only one item below):

☐ is attached hereto.

☒ was filed as United States application

Serial No. 10/723,162

on November 26, 2003

and was amended

on _____ (if applicable).

☐ was filed as PCT international application

Number _____

on _____

and was amended under PCT Article 19

on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications)				ATTORNEY'S DOCKET NUMBER VAN ESS - 2	
I hereby claim the benefit under Title 35, United States Code, Section 119(e) of any United States provisional application(s) listed below.					
(Application Number)		(Filing Date)			
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:					
PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:					
U.S. APPLICATIONS			STATUS (Check One)		
U.S. APPLICATION NUMBER	U.S. FILING DATE		PATENTED	PENDING	ABANDONED
PCT APPLICATIONS DESIGNATING THE U.S.					
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			
POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration numbers): <div style="display: flex; justify-content: space-between;"> <div> ALLISON C. COLLARD, Registration No. 22,532; EDWARD R. FREEDMAN, Registration No. 26,048; ELIZABETH COLLARD RICHTER, Registration No. 35,103 </div> <div> KURT KELMAN, Registration No. 18,628 FREDERICK J. DORCHAK, Registration No. 29,298 WILLIAM C. COLLARD, Registration No. 38,411 EDWARD J. CALLAGHAN, Registration No. 46,594 </div> </div>					
Send Correspondence to: COLLARD & ROE, P.C. 1077 Northern Boulevard Roslyn, New York 11576			Customer No. 25889		Direct Telephone Calls to: (name and telephone number) (516) 365-9802
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
		VAN ESS	Lester	J.	
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
		Cogan Station	PA	USA	
1	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
		Rob-len Farm, 5105 Route 973 East	Cogan Station	PA 17728 USA	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
2	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
0	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
3	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.					
SIGNATURE OF INVENTOR 201		SIGNATURE OF INVENTOR 202		SIGNATURE OF INVENTOR 203	
DATE		DATE		DATE	